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APPLICANTS

Charles L. Fuller, Columbia, MD;

\*\* CONTINUING DATA \*\*\*\*\*  
 NONE, *full*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 NONE, *full*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 12/04/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MD	SHEETS DRAWING 5	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature <i>Sullivan</i>	Initials <i>full</i>		

ADDRESS

04586  
 ROSENBERG, KLEIN & LEE  
 3458 ELLICOTT CENTER DRIVE-SUITE 101  
 ELLICOTT CITY, MD  
 21043

TITLE

Reconfigurable barrier system

FILING FEE  RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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